



**STATE OF MONTANA  
DEPARTMENT OF CORRECTIONS  
POLICY DIRECTIVE**

Policy No. DOC 4.5.11	Subject: <b>INFECTION CONTROL PROGRAM</b>
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Section 5: Clinical Services	Effective Date: May 1, 1998
Department Director Signature: /s/ Loraine Wodnik	Revised: 12/23/2016
Medical Director Signature: /s/ Tristan Kohut, MD	
Clinical Services Division Administrator Signature: /s/ Connie Winner	

## **I. POLICY**

The Department of Corrections will ensure that the health care services in each facility provide an infection control program that assists in maintaining a safe and healthy environment for offenders and staff which includes surveillance, prevention and control of communicable diseases.

## **II. APPLICABILITY**

Secure care facilities Department owned and contracted, as specified in contract.

## **III. DEFINITIONS**

Health Care Unit Services – The full complement of facility health care services that range from infirmary care to sick call, and include appropriate referrals.

Infection Control Committee – A committee that may include, but is not limited to, health care professionals, maintenance, laundry workers, and other staff as deemed appropriate by the facility.

Medical Director – The physician(s) designated by the Clinical Services Division administrator to oversee clinical practice decisions requiring medical judgments for offenders under Department jurisdiction.

NCCHC – National Commission on Correctional Health Care

Standard Precautions – Combines the major features of universal precautions and body substance isolation and are based on the principle that all blood, body fluids, secretions, excretions except sweat, non-intact skin, and mucous membranes may contain transmissible infectious agents. Standard precautions include hand hygiene, use of gloves, gown, mask, eye protection, or face shield depending on the anticipated exposure and safe injection practices.

## **IV. DEPARTMENT DIRECTIVES**

### **A. General Requirements**

1. Facility health care units will provide prompt care and treatment to offenders afflicted with infectious or communicable diseases.
2. Each health care unit will monitor infectious and communicable diseases in an effort to minimize their occurrence in accordance with state and federal guidelines.

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3. Health care providers will:
  - a. use standard precautions when providing offender health care;
  - b. use personal protective equipment that must be readily available for routine and emergency care;
  - c. have procedures in place to account for equipment; and
  - d. provide annual in-service training on its use.

**B. Infectious Disease Screening**

1. Each facility and residential program health care unit will screen offenders on admission for tuberculosis and acute infectious diseases according to guidelines established by the medical director in accordance with Centers for Disease Control (CDC) and NCCHC guidelines.
2. Each youth facility health care unit will ensure that a current immunization history for measles, mumps, rubella and tetanus is obtained and recorded on the offender's medical history form.

**C. Immunizations**

1. Each facility health care unit will make immunizations available to individuals without adequate immunizations or whose medical conditions would be severely compromised if they are infected with vaccine preventable diseases.

**D. Flu Vaccine**

1. Each fall, facility health care units will offer an influenza vaccine program to individuals identified at risk for complications of influenza.

**E. HIV**

1. Each facility health care unit will offer HIV counseling, education, and testing to all offenders.

**G. Hepatitis C**

1. Each facility health care unit will offer Hepatitis C counseling, education and screening to all offenders.
2. Facility health care staff will follow *CSD Procedure 4.5.11A Hepatitis C Treatment* for screening, diagnosis and treatment of Hepatitis C.

**H. Tuberculosis**

1. Each facility health care unit will screen offenders for tuberculosis annually as outlined by the CDC and Montana Public Health Tuberculosis Prevention and Control Guidelines.
2. The Department requires that all employees who work in residential facilities or programs be screened for tuberculosis upon employment and annually thereafter.

**I. Hepatitis B**

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1. Facility health care providers, in conjunction with Human Resources staff, will ensure that Department employees are offered Hepatitis B vaccinations in accordance with *DOC Policy 1.3.35 Bloodborne Pathogens Exposure Control Plan*.

**J. Ectoparasites**

1. Each facility will screen offenders for ectoparasites (lice and scabies) at intake and anytime an outbreak occurs among offenders.

**K. Treating Offenders**

1. Health care providers will treat offenders presenting with acute or chronic infectious or communicable diseases in accordance with the CDC and NCCHC guidelines, and must provide information about disease transmission and methods to prevent future infection of self or others.

**L. Isolating Offenders**

1. When medical staff orders an offender to be isolated for an infectious disease, health care providers will follow the CDC's current guidelines for prevention and control of infections.
2. When juvenile offenders are placed in isolation for an infectious disease, on site health care providers will monitor them at a minimum once daily for changes in physical and mental health.

**M. Prevention**

1. An integral component of the infection control program is prevention of the occurrence and spread of infectious and communicable diseases.
2. Health care providers will:
  - a. offer education on communicable disease prevention to offenders as part of the health education program;
  - b. maintain essential ongoing communication with the respective County Health Department and the Montana Department of Public Health and Human Services;
  - c. instruct correctional employees on measures to prevent disease transmission, including additional precautions that may be necessary during transport, hospital supervision, or while in an infirmary; and
  - d. assure that continuity of care is established with appropriate community resources prior to releasing offenders who are diagnosed with communicable or infectious disease.

**N. Reporting**

1. Each facility health care unit must report infectious and communicable diseases to the Montana Department of Public Health and Human Services and the Department's health services bureau chief.

**O. Blood Borne Pathogens**

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1. Facilities will handle and treat bodily fluid exposure incidents, and ensure employees use standard precautions when providing offender care, in accordance with *DOC Policy 1.3.35 Bloodborne Pathogens Exposure Control Plan*.

**P. Infection Control Committee**

1. Each Department facility housing more than 500 offenders will:
  - a. establish an infection control committee that meets at least quarterly;
  - b. require committee meeting notes to be kept and maintained on file;
  - c. provide a quarterly report to the facility administrator; and
  - c. ensure committee functions include, but are not limited to:
    - 1) tracking infectious and communicable diseases through health care units and safety and sanitation reports;
    - 2) analyzing epidemiological data and trends;
    - 3) making recommendations to decrease the incidence of disease; and
    - 4) monitoring the facility's application of standard precautions, cleaning and disinfectant techniques, and the disposal of medical and biohazardous waste.

**Q. Medical Sharps and Biohazardous Waste**

1. Facility health care units will dispose of medical sharps and biohazardous waste using methods and materials that are in compliance with Environmental Protection Agency standards.
2. Facility health care units will provide sharps with engineered sharps injury protections to prevent occupational exposure incidents.
3. The facility will arrange for proper waste disposal based on resources available in their respective communities.

**R. Decontamination**

1. The facility will ensure that contaminated non-disposable medical, dental and lab equipment is decontaminated using appropriate methods as specified by the manufacturer, CDC and OSHA guidelines.

**V. CLOSING**

Questions concerning this policy should be directed to the Department's Clinical Services Division health services bureau chief.

**VI. REFERENCES**

- A. 53-I-203, MCA
- B. P-B-01; *National Commission on Correctional Health Care Standards for Health Services in Prisons, 2014*
- C. Y-B-01; *National Commission on Correctional Health Care Standards for Health Services in Juvenile Detention and Confinement Facilities, 2015*
- D. *DOC Policy 1.3.35 Bloodborne Pathogens Exposure Control Plan*
- E. *CSD Procedure 4.5.11A Hepatitis C Treatment*

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- F. OSHA and Environmental Protection Agency Standards*
- G. Center for Disease Control*

## **VII. ATTACHMENTS**

None